

EXHIBIT A

CDBG DISCLOSURE REPORT

PART I - APPLICANT/GRANTEE INFORMATION

1. Applicant/grantee name, address and phone number

2. Indicate whether this is

Grant Number (Updated only): _____

Federal employer identification number: _____

3. Project Assisted/to be Assisted.

a. Fiscal year:

b. Entitlement grant(s)

Competitive grant

c. Amount requested/received:..... _____

d. Program income to be used with c. above: _____

e. Total of c. and d.: _____

PART II - THRESHOLD DETERMINATIONS

1. Is the amount listed in 3.e. (above) more than \$200,000? Yes ☐ No ☐

2. Have you received or applied for other HUD assistance (through programs listed in Appendix B of the instructions) which when added to 3.e. (above) amounts to more than \$200,000?

Yes ☐

No ☐

If the answer to either 1. or 2. of this part is "yes", then you must complete the remainder of this report.

If the answer to both 1. and 2. of this part is "no", then you are not required to complete the remainder of this report, but must sign the following certification.

I hereby certify that this information is true.

Elected Official)

(Date)

(Chief

PART III - OTHER GOVERNMENT ASSISTANCE PROVIDED/APPLIED FOR

1. Provide the requested information for any other Federal, State and/or local governmental assistance, on hand or applied for, that will be used in conjunction with the CDBG grant. (See Appendix B of the instructions)

Name and Address of Agency Providing or to Provide Assistance	Program	Type of Assistance	Amount Requested or Provided

PART IV - INTERESTED PARTIES

Alphabetical List of All Persons with a Reportable Financial Interest in the Project	Social Security No. or Employer ID No.	Type of Participation in Project	Financial Interest in Project \$ and %

PART V - EXPECTED SOURCES AND USES OF FUNDS

This Part requires that you identify the sources and uses of all assistance that have been or may be used in the project.

Source	Use

PART VI - CERTIFICATION

I hereby certify that the information provided in this disclosure is true and correct and I am aware that any false information or lack of information knowingly made or omitted may subject me to civil or criminal penalties under Section 1001 of Title 18 of the United States Code. In addition, I am aware that if I knowingly and materially violate any required disclosure of information, including intentional non-disclosure, I am subject to a civil money penalty not to exceed \$10,000 for each violation.

(Chief Elected Official)

(Date)

